**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. 441PAC 17 Arrowwood Drive ADDRESS (number and street) (Check if address is changed) Perkasie 18944 PΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS admin@441pac.org (Check if address is changed) Optional Second E-Mail Address nick@441pac.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00576819 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. John M. Glancey Type or Print Name of Treasurer John M. Glancey [Electronically Filed] 04 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

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